

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000005087

Entity Name: DYNASTY HEALTHCARE, LLC

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

12671 US HWY 98 STE 204  
DESTIN, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

12671 US HWY 98 STE 204  
DESTIN, FL 32550

**New Mailing Address:**

307 SCIOTO CT  
DULUTH, GA 30097

FEI Number: 58-2577969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROWN, DEBORAH D  
12671 US HWY 98 STE 204  
DESTIN, FL 32550 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WHITE, J PAUL  
Address: 307 SCIOTO CT  
City-St-Zip: DULUTH, GA 30097

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: J PAUL WHITE

MGR

02/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date